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## **TRANSMITTAL FORM**

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Application Number	10/748450-Conf. #2366
Filing Date	December 30, 2003
First Named Inventor	Richard L. BOYD
Art Unit	1644
Examiner Name	M. A. Belyavskyi
Attorney Docket Number	0286336.00150US1/NOR-011CP2

ENCLOSURES (Check all that apply)					
x Fee Transi	mittal Form	Drawing(s)		After Allowance Communication to TC	
Fee	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Amendmen	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Repty Brief)	
After	Final	Petition to Convert to a Provisional Application		Proprietary Information	
Affid	avits/declaration(s)	Power of Attorney, Revocat Change of Correspondence		Status Letter	
Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):	
Express At	bandonment Request	Request for Refund		Return Receipt Postcard	
X Supplemental Information Disclosure Statement		CD, Number of CD(s)			
Certified Copy of Priority Document(s)		Landscape Table or	CD		
Reply to Missing Parts/ Incomplete Application		Remarks			
	y to Missing Parts under FR 1.52 or 1.53				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP				
Signature	asa-houestles				
Printed name	Ann-Louise Kerner, Ph.D.				
Date	June 22, 2006			33,523	

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Dated: June 22, 2006

Signature Tuplanu & Da (Stephanie R Douglas)

JUN 2 6 2006

3/17 (01-06) 10651-0032

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE nder the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/748450-Conf. #2366 Application Number FEE TRANSMITTAL December 30, 2003 Filing Date For FY 2006 Richard L. BOYD First Named Inventor **Examiner Name** M. A. Belyavskyi Applicant claims small entity status. See 37 CFR 1.27 1644 Art Unit TOTAL AMOUNT OF PAYMENT 0286336.00150US1/NOR-011CP2 180.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Wilmer Cutler Pickering Hale and Dorr LLP X Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Multiple Dependent Claims** Fee Paid (\$) Fee Paid (\$) Fee (\$) HP = highest numer of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Fee (\$) HP = highest numer of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY Registration No. Signature Ola 33.523 (617) 526-6000 Telephone Name (Print/Type) Ann-Louise Kerner, Ph.D. Date June 22, 2006

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ed: June 22, 2006

Signature: \_ (Stephanie R. Douglas)

Docket No.: 0286336.00150US1/NOR-011CP2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Richard L. BOYD

Confirmation No.:

2366

Application No.:

10/748450

Art Unit:

1644

Filed:

December 30, 2003

Examiner:

M. A. Belyavskyi

(PATENT)

Title:

STIMULATION OF THYMUS FOR VACCINATION

DEVELOPMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)

Dear Sir:

This Information Disclosure Statement is being filed after the mailing date of the first Office Action on the merits and before the mailing date of a final Office Action or a Notice of Allowance.

Please charge the \$180.00 fee to our Deposit Account No. 08-0219.

Applicants request that the Examiner initial and return a copy of the enclosed Form PTO SB-08 with the next communication.

Respectfully submitted,

Dated: June 22, 2006

Ann-Louise Kerner, Ph

Registration No.:

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10748450

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180.00 DA

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Substitute for form 1449A/B/PTO				Complete if Known		
				Application Number	10/748450-Conf. #2366	
IN	FORMATION	1 DI	SCLOSURE	Filing Date	December 30, 2003	
STATEMENT BY APPLICANT			APPLICANT	First Named Inventor	Richard L. BOYD	
				Art Unit	1644	
(Use as many sheets as necessary)		Examiner Name	M. A. Belyavskyi			
Sheet	1	of	1	Attorney Docket Number	0286336.00150US1/NOR-011CP2	

	U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2</sup> ( if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
	AA*	US-4,049,805	09-20-1977	Strade		
	AB*	US-5,759,551	06-02-1998	Ladd et al.		

	FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No.1	Foreign Patent Document  Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear				
	ВА	EP-0882736A1		LABORATORIE THERAMEX, S.A.					

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \* CITE NO.: Those application(s) which are marked with an single asterisk (\*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁵ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²	
	CA	Gojo et al., Gene Therapy and Transplantation, (2000), Vol. 69, pp. 1-9.		
	СВ	Ross et al., "Gene Therapy in the United States: A Five-Year Status Report," Human Gene Therapy, 1996, pp. 1781-1790, Vol. 7.		
	CC	Belhadj et al., "Hepatosplenic gamma-delta T-cell lymphoma is a rare clinicopathologic entity with poor outcome: Report of a Series of 21 Patients," Blood, 2003, pp. 4261-4269, Vol. 102.		

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	Date	
Signature	Considered	\

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